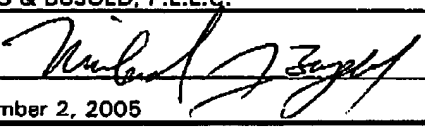
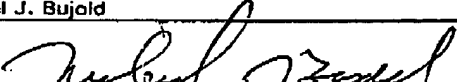


PTO/SB/21 (12-97)

Approved for use through 9/30/00. OMB 0651-0031
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/688,332	RECEIVED CENTRAL FAX CENTER NOV 02 2005
	Filing Date	October 17, 2003	
	First Named Inventor	Gerhard GUMPOLTSBERGER et al.	
	Group Art Unit	3831	
	Examiner Name	Ha Dinh HO	Fax: (571) 273-8300
Total No. of Pages in this Submission: 5	Attorney Docket Number	ZAHFRI P530US	
ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Amendment After Allowance <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.63	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):	
REMARKS			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual Name	Michael J. Bujold DAVIS & BUJOLD, P.L.L.C. Reg. No. 32,018 CUSTOMER NO. 020210		
Signature			
Date	November 2, 2005		
CERTIFICATE OF TRANSMISSION			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO on November 2, 2005			
Type or printed name	Michael J. Bujold		
Signature	 Date: November 2, 2005 (lfb)		

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11/2/05

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Gerhard GUMPOLTSBERGER and
Ralf DREIBHOLZ
Serial no. : 10/688,332
Filed : October 17, 2003
For : AUTOMATED MULTIPLE GEAR
TRANSMISSION
Group Art Unit : 3681
Examiner : Ha Dinh HO
Docket : ZAHFRI P530US

The Commissioner for Patents
U.S. Patent & Trademark Office
P. O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER ALLOWANCE
UNDER 37 CFR 1.312(a)

Dear Sir:

[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS AMENDMENT.

Further to the October 24, 2005 Notice of Allowance, the Applicant respectfully requests entry of the following amendment in the above identified application.

In the Claims:

Please amend claim 14 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the amended claims into the record of this case.